

Attorney's Docket No. B-3962 618027-2/VR

(ORIGINAL	COMBINED DECLARATION AND POWER OF ATTORNEY (ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL, CONTINUATION, OR CIP			
As a belo	ow named inventor, I hereby declare that:			
	TYPE OF DECLARATION			
This dec	laration is of the following type: (check one applicable item below)			
•	x] original			
-] design			
] supplemental			
	If the declaration is for an International Application being filed as a divisional, tion or continuation-in-part application, do not check next item; check appropriate			
	ist three items.			
	national stage of PCT			
NOTE: I	f one of the following 3 items apply, then complete and also attach ADDED PAGES FOR IAL, CONTINUATION, OR CIP.			
Į.] divisional			
[] continuation] continuation-in-part (CIP)			
t	j communion-m-part (CIP)			
	INVENTORSHIP IDENTIFICATION			
WARNING	G: If the inventors are each not the inventors of all the claims an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted.			
believe I original,	ence, post office address and citizenship are as stated below next to my name. I am the original, first and sole inventor (if only one name is listed below) or an first and joint inventor (if plural names are listed below) of the subject matter claimed and for which a patent is sought on the invention entitled:			
	TITLE OF INVENTION			
	EGRATED CIRCUITS PROTECTED AGAINST REVERSE ENGINEERING AND IETHOD FOR FABRICATING THE SAME USING VIAS WITHOUT METAL TERMINATIONS"			
	SPECIFICATION IDENTIFICATION			
the spec	sification of which: (complete (a), (b) or (c))			
	a)[X] is attached hereto.			
(b) [] was filed on as [] Serial No			
	or [] Express Mail No., as Serial No. not yet known,			
	and was amended on(if applicable).			
n A ir	mendments filed after the original papers are deposited with the PTO which contain ew matter are not accorded a filing date by being referred to in the declaration. accordingly, the amendments involved are those filed with the application papers or, the case of a supplemental declaration, are those amendments claiming matter not ncompassed in the original statement of invention or claims. See 37 CFR 1.67.			
(c) [] was described and claimed in PCT International Application No as amended under PCT Article 19 (1)			

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code Federal Regulations § 1.56.

[] In compliance with this duty there is attached an information disclosure statement 37 CFR 1.97.

PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign applications(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

(complete (d) or (e))

- (d) [X] no such applications have been filed.
- (e) [] such applications have been filed as follows.

NOTE: Where item (c) is entered above and the International Application which designated the U.S. claimed priority check item (e), enter the details below and make the priority claim.

EARLIEST FOREIGN APPLICATION(S), IF ANY, FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN(S)) PRIOR TO THIS U.S. APPLICATION

COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119
			[]YES []NO
			[]YES []NO

ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN(S)) PRIOR TO THIS U.S. APPLICATION



POWER OF ATTORNEY



As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Richard P. Berg, Reg. No. 28,145 Mavis S. Gallenson, Reg. No. 32,464 Kam C. Louie, Reg. No. 33,008 Ross A. Schmitt, Reg. No. 42,529 Victor Repkin, Reg. No. 45,039 John Palmer, Reg. No. 36,885 Peter D. Galloway, Reg. No. 27, 885 William R. Evans, Reg. No. 25, 858

(check the following item, if applicable)

[] Attached as part of this declaration and power of attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

SEND CORRESPONDENCE TO:

DIRECT TELEPHONE CALLS TO: (Name and telephone number)

Victor Repkin, Esq. c/o LADAS & PARRY 5670 Wilshire Boulevard, Suite 2100 Los Angeles, California 90036-5679

Victor Repkin

(323) 934-2300

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

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CHECK PROPINION OX(ES) FOR ANY OF THE FOLLOWING DDED PAGES(S) WHICH FORM A PART OF THIS DECLARATION

[]	Signature for third and subsequent joint inventors. Number of pages added
[1	Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. Number of pages added
]]	Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47. <i>Number of pages added Added</i> pages to combined declaration and power of attorney for divisional, continuation-in-part (CIP) application. <i>Number of pages added</i>
		* * *
[J	Authorization of attorney(s) to accept and follow instructions from representative.
		* * *
lf no this pa	fur age	ther pages form a part of this Declaration then end this Declaration with and check the following item.
r	χ.	This declaration ends with this page